



Atty. Dkt. No. 053466-0286

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Yasuko OZAKI et al.
Title: IMMUNOCHEMICAL ASSAY
FOR ANTI-HM1.24 ANTIBODY
Appl. No.: 09/622,646
International Filing Date: 02/25/1999
371(c) Date: 08/21/2000
Examiner: Christine E. Foster
Art Unit: 1641
Confirmation Number: 8792

RESPONSE TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	16	-	20	=	0	x	\$50.00	=	\$0.00
Independent Claims:	4	-	4	=	0	x	\$210.00	=	\$0.00
First presentation of any Multiple Dependent Claims:						+	\$370.00	=	\$0.00

04/30/2008 EEXUBAY1 0000003E 09622646

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120.00 OP

CLAIMS FEE TOTAL = \$0.00

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[X] Extension for response filed within the first month:	\$120.00	\$120.00
[] Extension for response filed within the second month:	\$460.00	\$0.00
[] Extension for response filed within the third month:	\$1,050.00	\$0.00
[] Extension for response filed within the fourth month:	\$1,640.00	\$0.00
[] Extension for response filed within the fifth month:	\$2,230.00	\$0.00
EXTENSION FEE TOTAL:		\$120.00
[] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$120.00
[] Small Entity Fees Apply (subtract ½ of above):		\$0.00
Extension Fees Previously Paid:		\$0.00
TOTAL FEE:		\$120.00

A credit card payment form in the amount of \$120.00 is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

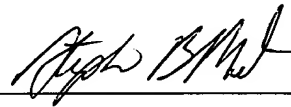
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

April 29, 2008

By



FOLEY & LARDNER LLP

Customer Number: 22428

Telephone: (202) 672-5569

Facsimile: (202) 672-5399

Stephen B. Maebius

Attorney for Applicant

Registration No. 35,264